MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

10/533832. FILING DATE

APPLICANT(S)

FILING DATE

21 JUN 2006

1									T AVE	•						
1		2.A	FILE	, 1		TER	AF	TER	CLAIN	15	T					
	H	IND.			IND.	ENDMENT	2 MAM	ENDMENT			AS FILED		AFTER I AMENDMENT		AFTE	
\vdash	1	1	+ 	"`	MID.	DEP.	IND.	DEP.	1		IND.	DEP.	IND.	DEP.	IND.	Ι
	2		1	7		 		ļ		51	 					╁
	3		1	7						52						┢
	4		12	7						53						┢
	5		2						ļ .	54						┢
	6		1	7					-	55						-
	7		(1)						ŀ	56						_
	8								-	57 58						_
	9		11,					-	- H	59						_
	0								- 1-	60						_
1			2						-	61						_
1			1						<u> </u>	62						
1		[1,						<u> </u>	63					$-\!\!\!\!-\!$	
1.			1						-	64						
1:			1.				-		<u> </u>	65						_
16			1,						-	66						_
17			1		$-\Gamma$				-	67						
18		1	<u> </u>				·			68						
19 20			<u>:</u>	12		$-\Gamma$				69						_
				<u> </u>		/				70			 			
21				!						71						_
23				 						72						_
24										73						_
25					_//					74						
26					-14					75						-
27	- 				1					16						
28	_				-17					7						-
29					+					8						_
30		\neg			1/	 -			7							_
31	7				1/				8							٠
32		7			17				8:							
33					7				8.							
34								\dashv	84							_
35								-	85					_		_
36	-							_	86			 		_		
37	 							_	87							
8-																
9-		<u> </u>			1				2.0				1			
0	 			·					90				-			<u>.</u>
1	-	+-							91		1.		1-	 		
2		-			-				92	15 V C			-	1		-
3	 	+	_ _					_	93	\mathcal{I}^-		1		1	+-	_
5	 -		_						94	\mathbf{I}			 	1		-
		-					<u> </u>		95			1-	1	1	1	_
5	_	-			-				96	111	17.	7			100	Y)
3		-			-			_	97		\Box		1	1	1	7
;		 -			<u> </u>	_	J	4	98	$oldsymbol{oldsymbol{\bot}}$			1	1	 	۲
;		 	-		 	_		_	99			1	—	1	 	4
-		 _	-			-		4	100				1	1	1	4
100	6	4	1		#		↓		TOTAL IN	0.	1		1	1	1	1
PŲ,	19	4	13	3	+		(TOTAL DE		~	-	4		4	
r sk	4		11	4					TOTAL							0